

# Provincial Thespian Officer Application Parent/Guardian Permission

Name: \_\_\_\_\_

School/Troupe # \_\_\_\_\_

I have read through this information and understand the commitment that I am making by becoming an PTO candidate. Please initial each statement and have your parent/guardian initial in the proper place.

I understand that my attendance is required at all Thespian meetings and events as listed in this application.

\_\_\_\_\_  
Student

\_\_\_\_\_  
Parent

I understand that I will be responsible for arranging my own transportation to and from all events.

\_\_\_\_\_  
Student

\_\_\_\_\_  
Parent

I understand that if elected, I will need to serve to the best of my ability, completing all assignments, and represent the British Columbia Thespian organization as a model Thespian.

\_\_\_\_\_  
Student

\_\_\_\_\_  
Parent

**(Optional)** The BC Thespians Society requires consent to use a students' name or photograph/video on our social media channels accessible to the general public. Therefore, your permission is requested to post your child's name, photograph or video of your child in connection with positive, day-to-day school activities, acting/theatre related creations, or personal accomplishments.

As the parent or guardian of the student named above, I give my consent to the publication/broadcast of his/her picture and/or name on BC Thespians public social media channels.

Please select the items below that you are comfortable with having shared on BC thespians social media channels:

Photo     Video     Name     School

\_\_\_\_\_  
Student

\_\_\_\_\_  
Parent

**Signed Student:** \_\_\_\_\_

**Signed Parent/Guardian:** \_\_\_\_\_